

16310 U.S. PTO
042104

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	RS0210Y
First Inventor or Application Identifier	Christopher D. Armour
Title	NOVEL ISOFORMS OF CENTROMERE PROTEIN E (CENPE)
Express Mail Label No.	ER 268257504 US

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>	ADDRESS TO: Commissioner for Patents Mail Stop Patent Application P.O. Box 1450 Alexandria, VA 22313-1450
1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
2. <input checked="" type="checkbox"/> Specification [Total Pages 45]	a. <input checked="" type="checkbox"/> Computer Readable Form (CRF)
3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 1]	b. <input checked="" type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input checked="" type="checkbox"/> paper
4. Oath or Declaration a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 14 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33 (b).	c. <input checked="" type="checkbox"/> Statements verifying identity of above copies
5. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	ACCOMPANYING APPLICATION PARTS
	7. <input type="checkbox"/> Assignment papers (cover sheet & document(s))
	8. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney
	9. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
	10. <input type="checkbox"/> Preliminary Amendment
	11. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
	12. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)
	13. <input type="checkbox"/> Other: _____

14. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. ____/____

Prior application information: Examiner _____ Group/Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.

15. CORRESPONDENCE ADDRESS

☒ Correspondence address below

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Name	R. Douglas Bradley	Registration No. (Attorney/Agent)	44,553
Signature	<i>R. Douglas Bradley</i>	Date	4/21/2004

EXPRESS MAIL CERTIFICATE

DATE OF DEPOSIT April 21, 2004

EXPRESS MAIL NO. ER 268257504 US

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS EXPRESS MAIL "POST OFFICE TO ADDRESSEE" ON THE ABOVE DATE IN AN ENVELOPE ADDRESSED TO COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450.

MAILED BY *Chris Bra*

DATE April 21, 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Assistant Commissioner for Patents
Washington, D.C. 20231

Deposit Acct. 502287
Rosetta Inpharmatics LLC
Our Case Docket No. RS0210Y

Sir:

Transmitted herewith for filing under 37 C.F.R. §1.53(b) is the patent application of Inventor(s):
Christopher D. Armour, John C. Castle, Philip W. Garrett-Engle, Zhengyan Kan, Patrick M. Loerch, and
Nicholas F. Tsinoremas

For: NOVEL ISOFORMS OF CENTROMERE PROTEIN E (CENPE)

For	Number Filed	Number Extra	Rate	Basic Fee \$770
Total Claims	24 -20 =	4 X	\$18	= \$72
Independent Claims	6 - 3 =	3 X	\$86	= \$258
Multiple Dependent Claims*			\$290	= \$0
*Add this fee if application contains any multiple dependent claims, regardless of number.		TOTAL FILING FEE		\$1,100

The Assistant Commissioner is hereby authorized to charge \$1,100 and any additional fees which may be required to Account No. 502287. Duplicate copy of this sheet is enclosed.

☐ Under provisions of 37 C.F.R. §1.53, this application is being filed without the declaration of each inventor.

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MAILED BY Cheryl Bra

DATE April 21, 2004

Respectfully,

R. Douglas Bradley

By: R. Douglas Bradley
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Date: April 21, 2004